## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/542916

| Γ   |   | CLAIMS                                    |  | SMALL ENTITY OTHER THAN                    |  |            |                     |                        |       |                    |  |
|---|---|---|--|--|--|------------|---------------------|------------------------|-------|--------------------|--|
|   | · · · · · · · · · · · · · · · · · · ·                         |   | (Column  | ij   | (Column 2)                                 |            | TYPE                |                        | OR    |                    | R THAN<br>ENTITY                                 |
| U.S. NATIONAL STAGE FEES  |   |   |  | ·  |  | 7          | RATE                | FEE                    | 1     | RATE               | FEE  |
| BASIC FEE   |   |   | SMALL ENT. =   | \$ 150                                     | LARGE ENT. = \$ 300                        | 7          | BASIC FEE           | 150                    | OR    | BASIC FEE          |  |
| EXAMINATION FEE   |   |   | Satisfies PCT Artic                                      |  | All other situations = \$ 100 / \$ 200     | 1          | EXAM. FEE           | 100                    | 1     | EXAM. FEE          | <del>                                     </del> |
| SEARCH FEE  |   |   | U.S. is ISA = \$ 50<br>ALL other count<br>\$ 200 / \$ 40 | ries =                                     | All other situations =:<br>\$ 250 / \$ 500 | 1          | SEARCH FEE          | 200                    |       | SEARCH FEE         | -  |
| FEE FOR EXTRA SPEC. PGS.  |   |   | minus  | 100 =                                      | / 50 =                                     |            | X \$ 125 =          |                        |       | X \$ 250 =         |  |
| TOTAL CHARGEABLE CLAIMS   |   |   | 19 minus 20 = .  |  | · .  |            | X \$ 25 =           |                        | OR    | X \$ 50 =          |  |
| INDEPENDENT CLAIMS  |   |   | minus 3 = .  |  |  | 1          | X \$ 100 =          |                        | OR    | X \$ 200 =         |  |
| MUI   | LTIPLE DEPEN  | IDENT CLAIM PR                            | ESENT  | ENT  |  |            | +\$ 180 =           |                        | OR    | + \$ 360 =         | <del>                                     </del> |
| * If the difference in column 1 is less than zero, enter "0"  |   |   |  |  | in column 2                                | J          | TOTAL               | 450                    | OR    | TOTAL              |  |
|   | CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) |   |  |  |  |            | SMALL E             |                        | OR    | OTHER<br>SMALL E   |  |
| AMENDMENTA  |   | REMAINING<br>AFTER<br>AMENDMENT           |  | NUMBER<br>PREVIOUS<br>PAID FOI             | R PRESENT<br>SLY EXTRA                     |            | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE               | ADDI-<br>TIONAL<br>FEE                           |
|   | Total   | . 19                                      | Minus **   | 20   | ) = —                                      |            | X \$ 25 =           |                        | OR'   | X \$ 50 =.         |  |
|   | Independent   | •   | Minus .  | ار<br>د                                    | 3   -                                      |            | X \$ 100 =          | 7                      | QR    | X \$ 200 =         |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                |   |  |  |  |            | + \$ 180 =          |                        | OR    | <b>\$</b> 360 =    | ì  |
|   |   |   |  | •  |  |            | TOTAL ADOIT.<br>FEE |                        | OR T  | TOTAL ADDIT.       |  |
|   |   | (Column 1)                                |  | (Column 2                                  | 2) (Column 3)                              | ٠٠.        |                     |                        | •     |                    |  |
| MENT B  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGHEST<br>NUMBER<br>PREVIOUSI<br>PAID FOR | PRESENT<br>LY EXTRA                        |            | RATE .              | ADDI-<br>TIONAL<br>FEE |       | RATE               | ADDI-<br>TIONAL<br>FEE                           |
| 윎   | Total   |   | Minus **   |  | 2  |            | X \$ 25 =           |                        | OR    | X \$ 50.=          |  |
|   | Independent   | •   | Minus ***  | •  | =  |            | X \$ 100 =          |                        | OR    | X \$ 200 =         |  |
|   | FIRST PRES  | ENTATION OF M                             | ULTIPLE DEPEND   | ENT CLA                                    | IM .                                       |            | + \$ 180 =          |                        | OR    | + \$ 360 =         |  |
|   |   |   |  |  |  | ' <b>"</b> | OTAL ADDIT.<br>FEE  |                        | ori 🛅 | OTAL ADDIT.<br>FEE |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  *** If the "Highest Number Previously Paid For" (N THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |   |  |  |  |            |                     |                        |       |                    |  |